

Submit 3 Copies To Appropriate District Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Minerals and Natural Resources

Form C-103  
June 19, 2008

RECEIVED  
FEB 22 2010  
OIL CONSERVATION DIVISION  
HOBBS

1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-25207 ✓
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> ✓
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name NORTH VACUUM ABO NORTH UNIT '14' ✓
8. Well Number 3 ✓
9. OGRID Number 252496 ✓
10. Pool name or Wildcat VACUUM; ABO, NORTH ✓

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator  
SHERIDAN PRODUCTION COMPANY, LLC ✓

3. Address of Operator  
9 GREENWAY PLAZA, SUITE 1300, HOUSTON, TX 77046

4. Well Location

Unit Letter E : 2180 feet from the N line and 660 feet from the W line ✓  
Section 12 Township 17S Range 34E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4030' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☒ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐  
DOWNHOLE COMMINGLE ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

WELL IS CURRENTLY IN TA STATUS. WE ARE REQUESTING AN EXTENSION & WILL RUN A CURRENT TA/MIT TEST ONCE WE GET APPROVAL.

Condition of Approval: Notify OCD Hobbs  
office 24 hours prior to running MIT Test & Chart

*This well has been approved thru 9-22-2013*

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Joyce A. Williams TITLE OPERATIONS TECH DATE 2/18/10

Type or print name JOYCE A WILLIAMS E-mail address: jwilliams@sheridanproduction.com PHONE: 713-548-1070

For State Use Only

APPROVED BY [Signature] TITLE OC FIELD REPRESENTATIVE / STAFF MANAGER DATE 2-23-10  
Conditions of Approval (if any):

# SHERIDAN PRODUCTION PARTNERS

## WELLBORE SCHEMATIC

OPERATOR: <u>Sheridan Production Partners</u>		REV DATE: <u>9/12/2007</u>
WELL NAME: <u>NVANU 14-3</u>		TD: _____
FIELD / PROSPECT: <u>NVU</u>	CO: <u>Lea</u>	STATE: <u>New Mexico</u>
SURFACE LOCATION: _____		GL: <u>4030'</u> KB: <u>4042'</u>
COMPLETED ZONE(S): _____		BHL: _____
RECOMP ZONE(S): _____		PB ZONE(S): _____
TBG/TAC/RODS/PUMP: _____		TAG DEPTH: _____ RC: _____ TAG DATE: _____
WELLBORE: _____		MISC: <u>30-025-25207</u>
<input type="checkbox"/> Original Completion	<input type="checkbox"/> Proposed Completion	<input checked="" type="checkbox"/> Current Completion

<b>DRILLING &amp; MECHANICAL</b> (Casing, tubing, cement, fish, pkr)	<b>PRODUCTION</b> (perfs, stim, zone info)
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